UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS WESTERN DIVISION

In re:	§	
EVER ARROWERS	§	G N 15 011 (0
EVERARDO HERNANDEZ	§	Case No. 15-81168
VANESSA G. HERNANDEZ	§	
	§	
Debtors	§	

CHAPTER 7 TRUSTEE'S FINAL ACCOUNT AND DISTRIBUTION REPORT CERTIFICATION THAT THE ESTATE HAS BEEN FULLY ADMINISTERED AND APPLICATION TO BE DISCHARGED (TDR)

BERNARD J. NATALE, chapter 7 trustee, submits this Final Account, Certification that the Estate has been Fully Administered and Application to be Discharged.

- 1) All funds on hand have been distributed in accordance with the Trustee's Final Report and, if applicable, any order of the Court modifying the Final Report. The case is fully administered and all assets and funds which have come under the trustee's control in this case have been properly accounted for as provided by law. The trustee hereby requests to be discharged from further duties as a trustee.
- 2) A summary of assets abandoned, assets exempt, total distributions to claimants, claims discharged without payment, and expenses of administration is provided below:

Assets Abandoned: 14,302.00 Assets Exempt: 28,350.00

(Without deducting any secured claims)

Total Distributions to Claimants: 27,868.14 Claims Discharged

Without Payment: 79,812.02

Total Expenses of Administration: 37,131.86

3) Total gross receipts of \$80,000.00 (see **Exhibit 1**), minus funds paid to the debtor and third parties of \$15,000.00 (see **Exhibit 2**), yielded net receipts of \$65,000.00 from the liquidation of the property of the estate, which was distributed as follows:

	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
SECURED CLAIMS (from Exhibit 3)	\$ 21,442.00	\$ 40,981.51	\$ 40,981.51	\$ 19,810.00
(Hom Lamott 3)	Ψ 21, 44 2.00	Ψ 40,761.31	Ψ 40,961.31	Ψ 1 <i>9</i> ,810.00
PRIORITY CLAIMS: CHAPTER 7 ADMIN. FEES AND CHARGES (from Exhibit 4)	NA	37,131.86	37,131.86	37,131.86
PRIOR CHAPTER				
ADMIN. FEES AND				
CHARGES (from Exhibit 5)	NA	NA	NA	NA
PRIORITY UNSECURED				
CLAIMS (from Exhibit 6)	2,796.00	0.00	0.00	0.00
GENERAL UNSECURED				
CLAIMS (from Exhibit 7)	42,623.00	21,009.16	21,009.16	8,058.14
TOTAL DISBURSEMENTS	\$ 66,861.00	\$ 99,122.53	\$ 99,122.53	\$ 65,000.00

- 4) This case was originally filed under chapter 7 on 04/28/2015. The case was pending for 16 months.
- 5) All estate bank statements, deposit slips, and canceled checks have been submitted to the United States Trustee.
- 6) An individual estate property record and report showing the final accounting of the assets of the estate is attached as **Exhibit 8**. The cash receipts and disbursements records for each estate bank account, showing the final accounting of the receipts and disbursements of estate funds is attached as **Exhibit 9**.

Pursuant to Fed R Bank P 5009, I hereby certify, under penalty of perjury, that the foregoing report is true and correct.

Dated: 08/08/2016 By:/s/BERNARD J. NATALE

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

EXHIBITS TO FINAL ACCOUNT

EXHIBIT 1 – GROSS RECEIPTS

DESCRIPTION	UNIFORM TRAN. CODE ¹	\$ AMOUNT RECEIVED
Personal Injury Claim [Car Accident] (Offered \$4	1129-000	80,000.00
TOTAL GROSS RECEIPTS		\$80,000.00

¹The Uniform Transaction Code is an accounting code assigned by the trustee for statistical reporting purposes.

EXHIBIT 2 – FUNDS PAID TO DEBTOR & THIRD PARTIES

PAYEE	DESCRIPTION	UNIFORM TRAN. CODE	\$ AMOUNT PAID
Everardo Hernandez	Exemptions	8100-002	15,000.00
TOTAL FUNDS PAID TO DEBTOR & THIRD PARTIES			\$ 15,000.00

EXHIBIT 3 – SECURED CLAIMS

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6D)	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
	GM Financial P. O. Box 181145 Arlington, TX 76096		21,442.00	NA	NA	0.00
9	AmeriCredit Financial Services Inc.	4110-000	NA	21,171.51	21,171.51	0.00
	Active Rehab & Wellness	4210-000	NA	4,254.69	4,254.69	4,254.69

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6D)	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
	Adult & Pediatric Orthopedics	4210-000	NA	710.00	710.00	710.00
	American Diagnostic MRI	4210-000	NA	1,700.00	1,700.00	1,700.00
	Farmers Insurance	4210-000	NA	5,000.00	5,000.00	5,000.00
	Integrity Medical	4210-000	NA	706.00	706.00	706.00
	Optum United Health Care	4210-000	NA	7,439.31	7,439.31	7,439.31
TOTAL SEC	CURED CLAIMS		\$ 21,442.00	\$ 40,981.51	\$ 40,981.51	\$ 19,810.00

EXHIBIT 4 – CHAPTER 7 ADMINISTRATIVE FEES and CHARGES

PAYEE	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
BERNARD J. NATALE	2100-000	NA	6,500.00	6,500.00	6,500.00
Associated Bank	2600-000	NA	0.00	0.00	0.00
Rabobank, N.A.	2600-000	NA	11.47	11.47	11.47
ATTY. BERNARD J. NATALE	3110-000	NA	2,246.25	2,246.25	2,246.25
ATTY. BERNARD J. NATALE	3120-000	NA	56.10	56.10	56.10
Clark Jsten Zuccki Frost & Williams	3210-600	NA	26,666.66	26,666.66	26,666.66
Clark Jsten Zuccki Frost & Williams	3220-610	NA	1,651.38	1,651.38	1,651.38
TOTAL CHAPTER 7 ADMIN. FEES AND CHARGES		\$ NA	\$ 37,131.86	\$ 37,131.86	\$ 37,131.86

EXHIBIT 5 – PRIOR CHAPTER ADMINISTRATIVE FEES and CHARGES

PAYEE	UNIFORM TRAN. CODE	CLAIMS SCHEDULED	CLAIMS ASSERTED	CLAIMS ALLOWED	CLAIMS PAID
NA	NA	NA	NA	NA	NA
TOTAL PRIOR CHAPTER ADMIN. FEES AND CHARGES		\$ NA	\$NA	\$ NA	\$ NA

EXHIBIT 6 – PRIORITY UNSECURED CLAIMS

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6E)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
,			1,398.00	NA	NA	0.00
	Internal Revenue Service P. O. Box 7346					
I	Philadelphia, PA 191017346		1,398.00	NA	NA	0.00
TOTAL PRIO CLAIMS	RITY UNSECURED		\$ 2,796.00	\$ 0.00	\$ 0.00	\$ 0.00

EXHIBIT 7 – GENERAL UNSECURED CLAIMS

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	Advanced Radiology					
	Consultants c/o Illinois					
	Collection Servi					
	8231 - 185th Street, #100					
	Tinley Park, IL 60487		140.00	NA	NA	0.00
	AT&T c/o Enhanced					
	Recovery Co					
	8014 Bayberry Road					
	Jacksonville, FL 32256		1,367.00	NA	NA	0.00
	Baxter Credit Union					
	400 North Lakeview Parkway					
	Vernon Hills, IL 60061		17,650.00	NA	NA	0.00
	Baxter Credit Union					
	400 North Lakeview Parkway					
	Vernon Hills, IL 60061		100.00	NA	NA	0.00
	Capital One Bank USA					
	15000 Capital One Drive					
	Richmond, VA 23238		266.00	NA	NA	0.00
	Cavalry SPV I, LLC/FIA Card	<u> </u>				
	c/o Keith S. Shindler, Ltd.					
	1990 E. Algonquin Road,					
	#180					
	Schaumburg, IL 60173		0.00	NA	NA	0.00

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	Charter Communication c/o					
	Credit Management LP					
	4200 International Pkwy					
	Carrollton, TX 75007		202.00	NA	NA	0.00
	Chase Card					
	P. 0. Box 15298					
	Wilmington, DE 19850		2,327.00	NA	NA	0.00
	Chase/Best Buy					
	P. O. Box 15298					
	Wilmington, DE 19850		1,869.00	NA	NA	0.00
	CitiFinancial					
	6801 Colwell Boulevard					
	Irving, TX 75039		6,743.00	NA	NA	0.00
	Comcast c/o Convergent					
	Outsourcing					
	800 SW 39th Street					
	Renton, WA 98057		240.00	NA	NA	0.00
	FIA / Cavalry SPV I, LLC c/o					
	Blitt and Gaines, P.C.					
	661 Glenn Avenue					
	Wheeling, IL 60090		1,451.00	NA	NA	0.00
	FIA Card Services, N.A. c/o					
	Cavalry Portfolio Services					
	P. 0. Box 27288					
	Tempe, AZ 85285		2,964.00	NA	NA	0.00

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	First Premier Bank					
	601 South Minnesota Avenue					
	Sioux Falls, SD 57104		517.00	NA	NA	0.00
	GE Capital/JC					
	Penney/Portfolio c/o Blatt					
	Hasenmiller Leibske					
	10 South LaSalle Street,					
	#2200					
	Chicago, IL 606031069		0.00	NA	NA	0.00
	GECRB / JC Penney c/o					
	Portfolio Recovery Assoc					
	120 Corporate Boulevard					
	Norfolk, VA 23502		1,116.00	NA	NA	0.00
	Kohls/Capital One					
	N56 W 17000 Ridgewood Dr					
	Menomonee Falls, WI 53051		1,138.00	NA	NA	0.00
	Municipality Park Ridge IL					
	c/o A/r Concepts					
	18-3 E Dundee Road					
	Barrington, IL 60010		1,022.00	NA	NA	0.00
	Spring Grove Dental					
	2100 Route 12, Suite 202					
	P. 0. Box 310					
	Spring Grove, IL 600810310		816.00	NA	NA	0.00

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	Sprint c/o Afni, Inc.					
	P. 0. Box 3097					
	Bloomington, IL 61702		258.00	NA	NA	0.00
	Synchrony Bank c/o Portfolio					
	Recovery Assoc					
	120 Corporate Boulevard					
	Norfolk, VA 23502		676.00	NA	NA	0.00
	T-Mobile c/o Amsher					
	Collection Service					
	600 Beacon Pkwy W., #30					
	Birmingham, AL 35209		229.00	NA	NA	0.00
	T-Mobile c/o Midland					
	Funding					
	8875 Aero Drive, #200					
	San Diego, CA 92123		514.00	NA	NA	0.00
	World Financial Network					
	Bank c/o Portfolio Recovery					
	Assoc					
	120 Corporate Boulevard					
	Norfolk, VA 23502		1,018.00	NA	NA	0.00
	Advanced Radiology					
	Consulants	7100-000	NA	0.00	0.00	0.00
	American InfoSource LP as					
7	agent for	7100-000	NA	119.01	119.01	45.65

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	AmeriCredit Financial					
8-2	Services Inc.	7100-000	NA	11,234.19	11,234.19	4,308.91
	AT&T	7100-000	NA	0.00	0.00	0.00
	Baxter Credit Union	7100-000	NA	0.00	0.00	0.00
10	Capital One N. A.	7100-000	NA	1,138.62	1,138.62	436.72
5	Capital One N. A.	7100-000	NA	325.15	325.15	124.71
1	Cavalry SPV I LLC	7100-000	NA	1,711.68	1,711.68	656.52
2	Cavalry SPV I LLC	7100-000	NA	2,963.88	2,963.88	1,136.81
	Cavalry SPV I, LLC/FIA Card	7100-000	NA	0.00	0.00	0.00
	Chase Card	7100-000	NA	0.00	0.00	0.00
	Chase/Best Buy	7100-000	NA	0.00	0.00	0.00
	Citifinancial	7100-000	NA	0.00	0.00	0.00
	Comcast	7100-000	NA	0.00	0.00	0.00
	FIA/Cavalry SPV I, LLC	7100-000	NA	0.00	0.00	0.00
	Kohls/Capital ONe	7100-000	NA	0.00	0.00	0.00
	Midland Credit Management	,				
4	Inc as agent for	7100-000	NA	514.26	514.26	197.25
	Municipality Park Ridge IL	7100-000	NA	0.00	0.00	0.00

CLAIM NO.	CLAIMANT	UNIFORM TRAN. CODE	CLAIMS SCHEDULED (from Form 6F)	CLAIMS ASSERTED (from Proofs of Claim)	CLAIMS ALLOWED	CLAIMS PAID
	Portfolio Recovery Associates					
11	LLC	7100-000	NA	675.89	675.89	259.24
	Portfolio Recovery Associates					
12	LLC	7100-000	NA	1,017.86	1,017.86	390.40
	Portfolio Recovery Associates					
13	LLC	7100-000	NA	1,050.20	1,050.20	402.81
	Spring Grove Dental	7100-000	NA	0.00	0.00	0.00
6	Sprint Corp.	7100-000	NA	258.42	258.42	99.12
	T-Molile	7100-000	NA	0.00	0.00	0.00
TOTAL GEI CLAIMS	NERAL UNSECURED		\$ 42,623.00	\$ 21,009.16	\$ 21,009.16	\$ 8,058.14

Doc 41 Filed 08/08/16 Entered 08/08/16 15:47:22 Desc Main INDIVIDUAL ESTATE PROPERTY RECORD AND REPORT Case 15-81168

ASSET CASES

Thomas M. Lynch

Exhibit 8

Case No: 15-81168 Case Name:

EVERARDO HERNANDEZ

TML

Judge:

VANESSA G. HERNANDEZ

For Period Ending: 08/08/2016

Trustee Name:

04/28/2015 (f)

BERNARD J. NATALE

Date Filed (f) or Converted (c): 341(a) Meeting Date:

06/04/2015

Claims Bar Date: 09/09/2015

1	2	3	4	5	6
Asset Description (Scheduled and Unscheduled (u) Property)	Petition/ Unscheduled Values	Est Net Value (Value Determined by Trustee, Less Liens, Exemptions, and Other Costs)	Property Formally Abandoned OA=554(a)	Sale/Funds Received by the Estate	Asset Fully Administered (FA)/ Gross Value of Remaining Assets
Deposits of Money (BMO Harris Checking)	190.00	0.00		0.00	FA
2. Deposits of Money (BMO Harris Savings)	3,412.00	0.00		0.00	FA
Couch, Television and Bedroom Set	550.00	0.00		0.00	FA
Kitchen Utensils and Microwave	100.00	0.00		0.00	FA
5. Wearing Apparel	450.00	0.00		0.00	FA
6. Jewelry	250.00	0.00		0.00	FA
7. Home Computer and Printer	200.00	0.00		0.00	FA
8. 401(k) Plan	3,500.00	3,400.00		0.00	FA
Personal Injury Claim [Car Accident] (Offered \$4	40,000.00	65,000.00		80,000.00	FA
10. 2013 Chevrolet Malibu (55,000 miles)	15,000.00	0.00		0.00	FA
11. 2002 GMC Envoy (177,000 miles) (Joint with Mothe	4,000.00	0.00		0.00	FA

Gross Value of Remaining Assets

TOTALS (Excluding Unknown Values)

\$67,652.00

\$68,400.00

(Total Dollar Amount in Column 6)

\$80,000.00

Major activities affecting case closing which are not reflected above, and matters pending, date of hearing or sale, and other action:

		Case 15-81168 Doc 41	Filed 08/08/16	Entered 08/08/16 15:47:22	Desc Main
RE PROP#	1	 Imported from original petition Doc# 1	Document I	Page 13 of 20	
RE PROP#	2	 Imported from original petition Doc# 1			
RE PROP#	3	 Imported from original petition Doc# 1			
RE PROP#	4	 Imported from original petition Doc# 1			
RE PROP#	5	 Imported from original petition Doc# 1			
RE PROP#	6	 Imported from original petition Doc# 1			
RE PROP#	7	 Imported from original petition Doc# 1			
RE PROP#	8	 Imported from original petition Doc# 1			
RE PROP#	10	 Imported from original petition Doc# 1			
RE PROP #	11	 Imported from original petition Doc# 1			

Initial Projected Date of Final Report (TFR): 06/30/2017

Current Projected Date of Final Report (TFR): 06/30/2017

Page:

Exhibit 8

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Exhibit 9

1

Case 15-81168 Doc 41 Filed 08/08/16 2Entered 08/08/16 15:47:22 Desc Main estate casp receivers and bigsulfsements record

Case No: 15-81168

Trustee Name: BERNARD J. NATALE

Case Name: EVERARDO HERNANDEZ

Bank Name: Associated Bank

VANESSA G. HERNANDEZ

Account Number/CD#: XXXXXX8129

Checking

Taxpayer ID No: XX-XXX4736

Blanket Bond (per case limit): \$3,000.00

For Period Ending: 08/08/2016

Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
02/24/16		Transfer from Acct # xxxxxx66	Transfer of Funds	9999-000	\$16,860.49		\$16,860.49
03/07/16		Associated Bank	Bank Service Fee under 11 U.S.C. § 330(a)(1)(B), 503(b) (1), and 507(a)(2)	2600-000		\$10.00	\$16,850.49
03/09/16		Associated Bank	Bank Service Fee under 11 U.S.C. § 330(a)(1)(B), 503(b) (1), and 507(a)(2) Refund of Service Fee charged on 3/7/16	2600-000		(\$10.00)	\$16,860.49
04/06/16	5001	BERNARD J. NATALE 1639 N ALPINE RD SUITE 401 EDGEBROOK OFFICE CENTER ROCKFORD, IL 61107	Final distribution representing a payment of 100.00 % per court order.	2100-000		\$6,500.00	\$10,360.49
04/06/16	5002	ATTY. BERNARD J. NATALE 1639 N ALPINE ROAD SUITE 401 EDGEBROOK OFFICE CENTER ROCKFORD, IL 61107	Distribution			\$2,302.35	\$8,058.14
		ATTY. BERNARD J. NATALE	Final distribution representing a payment of 100.00 % per court order. (\$2,2)	46.25) 3110-000			
		ATTY. BERNARD J. NATALE	Final distribution representing a payment of 100.00 % per court order. (\$	56.10) 3120-000			
04/06/16	5003	Internal Revenue Service P. O. Box 7346 Philadelphia, PA 19101-7346	Final distribution to claim 3 representing a payment of 100.00 % per court order.	5800-000		\$1,398.48	\$6,659.66
04/06/16	5004	Cavalry SPV I LLC 500 Summit Lake Drive, Ste 400 Valhalla, NY 10595	Distribution			\$1,482.10	\$5,177.56
		Cavalry SPV I LLC	Final distribution to claim 1 (\$5 representing a payment of 31.70 % per court order.	7100-000			
		Cavalry SPV I LLC	Final distribution to claim 2 (\$9 representing a payment of 31.70 % per court order.	39.52) 7100-000			

Exhibit 9

\$5,177.56

2

Case 15-81168 Doc 41 Filed 08/08/16 15:47:22 Desc Main ESTATE CASP RECEMENTS AND DISSOURS EMEANTS RECORD

Case No: 15-81168

Trustee Name: BERNARD J. NATALE

Case Name: EVERARDO HERNANDEZ

Bank Name: Associated Bank

VANESSA G. HERNANDEZ

Account Number/CD#: XXXXXX8129

Checking

Taxpayer ID No: XX-XXX4736

Blanket Bond (per case limit): \$3,000.00

For Period Ending: 08/08/2016 Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
04/06/16	5005	Midland Credit Management Inc as agent for Midland Funding LLC PO Box 2011 Warren, MI 48090	Final distribution to claim 4 representing a payment of 31.70 % per court order.	7100-000		\$163.01	\$5,014.55
04/06/16	5006	Capital One N. A. PO Box 71083 Charlotte, NC 28272-1083	Final distribution to claim 5 representing a payment of 31.70 % per court order.	7100-000		\$103.07	\$4,911.48
04/06/16	5007	Sprint Corp. Attn Bankruptcy Dept PO Box 7949 Overland Park, KS 66207-0949	Final distribution to claim 6 representing a payment of 31.70 % per court order.	7100-000		\$81.92	\$4,829.56
04/06/16	5008	American InfoSource LP as agent for T Mobile/T-Mobile USA Inc PO Box 248848 Oklahoma City, OK 73124-8848	Final distribution to claim 7 representing a payment of 31.70 % per court order.	7100-000		\$37.72	\$4,791.84
04/06/16	5009	AmeriCredit Financial Services Inc. dba GM Financial P O Box 183853 Arlington, TX 76096	Final distribution to claim 8 representing a payment of 31.70 % per court order.	7100-000		\$3,561.11	\$1,230.73
04/06/16	5010	Capital One N. A. c o Becket and Lee LLP POB 3001 Malvern, PA 19355-0701	Final distribution to claim 10 representing a payment of 31.70 % per court order.	7100-000		\$360.93	\$869.80
04/06/16	5011	Portfolio Recovery Associates LLC POB 41067 Norfolk, VA 23541	Distribution			\$869.80	\$0.00
		Portfolio Recovery Associates LLC	Final distribution to claim 11 (\$214.25 representing a payment of 31.70 % per court order.	7100-000			
		Portfolio Recovery Associates LLC	Final distribution to claim 12 (\$322.65 representing a payment of 31.70 % per court order.	7100-000			
		Portfolio Recovery Associates LLC	Final distribution to claim 13 (\$332.90 representing a payment of 31.70 % per court order.	7100-000			

Exhibit 9

3

Case 15-81168 Doc 41 Filed 08/08/16 15:47:22 Desc Main ESTATE CASP RECEMENTS AND DISSOURS MEANTS RECORD

Case No: 15-81168

Trustee Name: BERNARD J. NATALE

Case Name: EVERARDO HERNANDEZ

Bank Name: Associated Bank Account Number/CD#: XXXXXX8129

VANESSA G. HERNANDEZ

Checking

Taxpayer ID No: XX-XXX4736

Blanket Bond (per case limit): \$3,000.00

For Period Ending: 08/08/2016

Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
04/19/16	5003	Internal Revenue Service P. O. Box 7346 Philadelphia, PA 19101-7346	Final distribution to claim 3 representing a payment of 100.00 % per court order. Reversal Check was returned by the Creditor stating that the debt was paid by the debtor.	5800-000		(\$1,398.48)	\$1,398.48
05/12/16	5012	Cavalry SPV I LLC 500 Summit Lake Drive, Ste 400 Valhalla, NY 10595	Distribution			\$311.23	\$1,087.25
		Cavalry SPV I LLC	Final distribution to claim 1 (\$113.94 representing a payment of 38.36 % per court order.	7100-000			
		Cavalry SPV I LLC	Final distribution to claim 2 representing a payment of 38.36 % per court order. (\$197.29)	7100-000			
05/12/16	5013	Midland Credit Management Inc as agent for Midland Funding LLC PO Box 2011 Warren, MI 48090	Final distribution to claim 4 representing a payment of 38.36 % per court order.	7100-000		\$34.24	\$1,053.01
05/12/16	5014	Capital One N. A. PO Box 71083 Charlotte, NC 28272-1083	Final distribution to claim 5 representing a payment of 38.36 % per court order.	7100-000		\$21.64	\$1,031.37
05/12/16	5015	Sprint Corp. Attn Bankruptcy Dept PO Box 7949 Overland Park, KS 66207-0949	Final distribution to claim 6 representing a payment of 38.36 % per court order.	7100-000		\$17.20	\$1,014.17
05/12/16	5016	American InfoSource LP as agent for T Mobile/T-Mobile USA Inc PO Box 248848 Oklahoma City, OK 73124-8848	Final distribution to claim 7 representing a payment of 38.36 % per court order.	7100-000		\$7.93	\$1,006.24
05/12/16	5017	AmeriCredit Financial Services Inc. dba GM Financial P O Box 183853 Arlington, TX 76096	Final distribution to claim 8 representing a payment of 38.36 % per court order.	7100-000		\$747.80	\$258.44

Exhibit 9

Case 15-81168 Doc 41 Filed 08/08/16 2Entered 08/08/16 15:47:22 Desc Main estate casp receivers and brown and brown are casp receivers.

Case Name: EVERARDO HERNANDEZ

Case No: 15-81168

Taxpayer ID No: XX-XXX4736

VANESSA G. HERNANDEZ

Trustee Name: BERNARD J. NATALE

Bank Name: Associated Bank

Account Number/CD#: XXXXXX8129

Checking

Blanket Bond (per case limit): \$3,000.00

For Period Ending: 08/08/2016 Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
05/12/16	5018	Capital One N. A. c o Becket and Lee LLP POB 3001 Malvern, PA 19355-0701	Final distribution to claim 10 representing a payment of 38.36 % per court order.	7100-000		\$75.79	\$182.65
05/12/16	5019	Portfolio Recovery Associates LLC POB 41067 Norfolk, VA 23541	Distribution			\$182.65	\$0.00
		Portfolio Recovery Associates LLC	Final distribution to claim 11 (\$44.99) representing a payment of 38.36 % per court order.	7100-000			
		Portfolio Recovery Associates LLC	Final distribution to claim 12 (\$67.75) representing a payment of 38.36 % per court order.	7100-000			
		Portfolio Recovery Associates LLC	Final distribution to claim 13 (\$69.91) representing a payment of 38.36 % per court order.	7100-000			

COLUMN TOTALS	\$16,860.49	\$16,860.49
Less: Bank Transfers/CD's	\$16,860.49	\$0.00
Subtotal	\$0.00	\$16,860.49
Less: Payments to Debtors	\$0.00	\$0.00
Net	\$0.00	\$16,860.49

Exhibit 9

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Case No: 15-81168

Taxpayer ID No: XX-XXX4736

For Period Ending: 08/08/2016

Case Name: EVERARDO HERNANDEZ

VANESSA G. HERNANDEZ

Trustee Name: BERNARD J. NATALE

Bank Name: Rabobank, N.A.

Account Number/CD#: XXXXXX66

Checking Account

Blanket Bond (per case limit): \$3,000.00

Separate Bond (if applicable):

1	2	3	4		5	6	7
Transaction Date	Check or Reference	Paid To / Received From	Description of Transaction	Uniform Tran. Code	Deposits (\$)	Disbursements (\$)	Account/CD Balance (\$)
01/25/16	9	Geico General Insuance Co. One Geico Center Macon, GA 312960001	Pymt of Settlement Funds for PI Cause of Action	1129-000	\$80,000.00		\$80,000.00
01/27/16	101	Clark Jsten Zuccki Frost & Williams Attn: Kevin P Justen 7320 N Alpine Road Rockford, IL 61111	Pymt of Spec Counsel Attorney Fees	3210-000		\$26,666.66	\$53,333.34
01/27/16	102	Clark Jsten Zuccki Frost & Williams Attn: Kevin P Justen 7320 N Alpine Road Rockford, IL 61111	Payment of Special Counsel Costs & Expenses	3220-000		\$1,651.38	\$51,681.96
01/27/16	103	Adult & Pediatric Orthopedics	Payment of Medical Lien	4210-000		\$710.00	\$50,971.96
01/27/16	104	Integrity Medical	Payment of Medical Lien	4210-000		\$706.00	\$50,265.96
01/27/16	105	Farmers Insurance	Payment of subrogation lien	4210-000		\$5,000.00	\$45,265.96
01/27/16	106	American Diagnostic MRI	Payment of Medical Lien	4210-000		\$1,700.00	\$43,565.96
01/27/16	107	Active Rehab & Wellness	Payment of Medical Lien	4210-000		\$4,254.69	\$39,311.27
01/27/16	108	Optum United Health Care	Payment of Medical Lien	4210-000		\$7,439.31	\$31,871.96
01/27/16	109	Everardo Hernandez	Payment of Debtor's Personal Injury Exemption	8100-002		\$15,000.00	\$16,871.96
01/29/16		Rabobank, N.A.	Bank and Technology Services Fee	2600-000		\$11.47	\$16,860.49
02/24/16		Transfer to Acct # xxxxxx8129	Transfer of Funds	9999-000		\$16,860.49	\$0.00

COLUMN TOTALS	\$80,000.00	\$80,000.00
Less: Bank Transfers/CD's	\$0.00	\$16,860.49
Subtotal	\$80,000.00	\$63,139.51
Less: Payments to Debtors	\$0.00	\$15,000.00

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Exhibit 9

Page:

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Page Subtotals: \$0.00 \$0.00 UST Form 101-7-TDR (10/1/2010) (Page: 19)

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Exhibit 9

TOTAL OF ALL ACCOUNTS

NET ACCOUNT **NET DEPOSITS DISBURSEMENTS BALANCE** \$80,000.00 \$0.00 XXXXXX66 - Checking Account \$48,139.51 XXXXXX8129 - Checking \$0.00 \$0.00 \$16,860.49 \$80,000.00 \$65,000.00 \$0.00 (Excludes account (Excludes payments Total Funds on Hand transfers) to debtors)

Total Allocation Receipts: \$0.00
Total Net Deposits: \$80,000.00

Total Gross Receipts: \$80,000.00